



Sangamon County Building & Zoning
ELECTRICAL APPLICATION
Room 213, 200 S. Ninth Street, Springfield, IL 62701
(217) 753-6760 or zoning@sangamonil.gov

FOR OFFICE USE ONLY

PERMIT#: _____

PARCEL#: _____

ZONING: _____

OWNER INFORMATION

Name: _____

Address/Zip: _____

Phone#: _____ Email (Print): _____

ELECTRICAL CONTRACTOR

Name: _____

Address/Zip: _____

Phone#: _____ Email (Print): _____

PROJECT MANAGER

Name: _____

Address/Zip: _____

Phone#: _____ Email (Print): _____

PROJECT INFORMATION

Project Address or Parcel #: _____

Fixture:	Quantity:	Fixture:	Quantity:
Panel Size		Plug Receptacles	
Sub Feeder Size		Smoke Detectors Circuits	
Motors		GFI Outlets	
Ranges		Lighting Fixtures	
Air Heaters		Attic Fans	
Baseboards		Illuminated Signs	
Dryer		Other Circuits	
Water Heater		Pool Pumps	
Ceiling Fans		Spa	
Ceiling Outlets		Other	
Switches			

SCOPE OF WORK & PROJECT COST

Please Explain In Detail: Square Footage: _____ Material/Labor: _____

Please Read and Sign

I certify that I am the owner or representative of the property which is the subject of this application, I hereby consent to the making of this application and the approval of the plans submitted herewith. I further consent to the inspection of this property in connection with this application as deemed necessary by the County agency. As the property owner or representative I assume the responsibility of locating any property lines, setback lines, easements, right of way, flood areas, etc., any construction within these areas may result in removal at the owner's or representative's expense. A Zoning Permit is valid for a period of six (6) months from date of approval and construction must commence and be worked on diligently thereafter or this permit may be canceled upon notification by the Zoning Administrator unless a written request is submitted to the Zoning Department within fourteen (14) days prior to expiration.

Applicant Signature

Applicant Printed Name

Date

Applicant is: ☐ Building/property owner ☐ General Contractor Representative ☐ Tenant
 ☐ Other _____

If not the property owner, an affidavit is required with parties signatures (owner/s and contractor) stating aware that a building permit is being applied for.

OFFICE USE ONLY

RESIDENTIAL

New Construction/Remodel/Alteration:

Square Feet x \$7.00 x .007

Minimum Fee: \$50.00

SERVICE UPGRADE

Materials + Labor x .007

Minimum Fee: \$50.00

COMMERCIAL

Materials + Labor x.009

Minimum Fee. \$50.00

PERMIT FEE:	
PENALTY FEE:	
TOTAL FEE:	